

# OSHA 10 Hour Outreach Training

*Presented by:*

The Massachusetts Division of Occupational Safety

On-Site Consultation Program

Hosted by: Porter & Chester Institute

**Two-Day 10-hour Training Course in Construction Safety and Health**  
**Complete Attendance Mandatory for OSHA Card**

**Wednesday March 11, 2009 8:00 a.m. – 1:45 p.m.**

**Thursday March 12, 2009 8:00 a.m. – 1:45 p.m.**

(no refreshments served - feel free to bring your own; 10 minute breaks between subjects)

Indian Meadows Golf Club  
275 Turnpike Road  
Westboro, MA 01581



**From the Massachusetts Turnpike (I-90):**

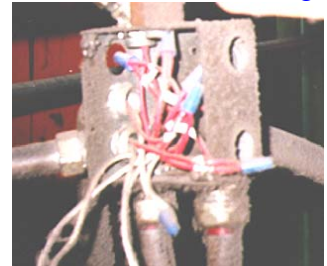
Take exit 11A onto Rt 495 North toward LOWELL. Take exit 23B onto Route 9 (Turnpike Rd) West toward WORCESTER. Travel ~4.5 miles to 275 Turnpike Rd .

The Massachusetts Division of Occupational Safety – Consultation Program is offering a **free** training seminar for those wishing to acquire the OSHA 10 Hour Card. The Outreach Training Program is intended as an orientation to Occupational Safety and Health. Workers must receive additional training on specific hazards of their job.

**Registration:** Please complete a **legible** registration form below for each registrant and *email to Jean Manoli at [jean.manoli@state.ma.us](mailto:jean.manoli@state.ma.us) or fax form to 617-244-2705*

*Lastly, if no other alternative, via phone at 617-969-7177 x336*

**Please leave name, address and phone number.**



Space is limited to 50. **Unless informed otherwise your registration will be honored.** You cannot register at the training site. First come first served. Registration ends March 9, 2009.

Topics will include:

**Introduction to OSHA with Four High Hazards (2 hrs)**

**Electrical Safety**

**Fall Protection**

**Scaffolds**

**Trench/Excavation Safety**

**Personnel Protective Equipment**

**Health Hazards in Construction**

**Hand and Power Tools**

**Fire Safety / Ladders and Stairways**

Questions?

Call Jean Manoli or Kathy Flannery at 617-969-7177

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## March 2009 Westboro OSHA 10-Hour Training Course

Name \_\_\_\_\_ Street Address \_\_\_\_\_  
Company Name \_\_\_\_\_ City \_\_\_\_\_ State, \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Return this registration form to: Attention: Jean Manoli, MA DOS

[jean.manoli@state.ma.us](mailto:jean.manoli@state.ma.us)

1001 Watertown Street, West Newton, MA 02465  
or fax your registration form to 617-244-2705